If your answer is "yes," state both your gross and net salary or wages per month, and give the name and address of your employer:

Gross:

Net:

28

Employer:

25

26

27

	N .					
1	If the answer is "no," state the date of last employment and the amount of the gross and net					
2	salary and wages per month which you received. (If you are imprisoned, specify the last					
3	place of employment prior to imprisonment.)					
4	<u> 16</u>	/SON AMORICA 200	5 (3	-000 m/n	dtroc	
5						
6				·	<del></del> _	
7	2. Have you received, within the past twelve (12) months, any money from any of the					
8	following sources:					
9	a.,	Business, Profession or	Yes	No <u>X</u>		
10		self employment				
11	b.	Income from stocks, bonds,	Yes	_ No 🗶		
12		or royalties?	Neural Control of the			
13	c.	Rent payments?		_ No <u>×</u>		
14	· d.	Pensions, annuities, or	Yes			
15		life insurance payments?	•			
16	e.	Federal or State welfare payments,	Yes	_ No <u>×</u>		
ا 17		Social Security or other govern-				
8		ment source?		, "		
9	If the answer is "yes" to any of the above, describe each source of money and state the amount					
20	received from each.					
21	·	NA		·	<del></del>	
22			· · · · · · · · · · · · · · · · · · ·	- di	<del></del>	
3	3. Are you married? Yes No X					
4	Spouse's Full Name:					
25	Spouse's Place of Employment:					
6	Spouse's Monthly Salary, Wages or Income:					
7	Gross \$	Net \$	- Mari	12	· ·	
8	4. a. List amount you contribute to your spouse's support:\$					
- 11						

1	b. List the persons other than your spouse who are dependent upon you for				
2	support and indicate how much you contribute toward their support. (NOTE:				
3	For minor children, list only their initials and ages. DO NOT INCLUDE				
4	THEIR NAMES.).				
5	NA				
6					
7	5. Do you own or are you buying a home? Yes No				
8	Estimated Market Value: \$ Amount of Mortgage: \$				
9	6. Do you own an automobile? Yes No				
10	Make V/A Year V/A Model V/A				
11	Is it financed? Yes No If so, Total due: \$				
12	Monthly Payment: \$				
13	7. Do you have a bank account? Yes No \( \sum_{\text{(Do not include account numbers.)}} \)				
14	Name(s) and address(es) of bank:				
15					
16	Present balance(s): \$				
17	Do you own any cash? Yes No X Amount: \$				
18	Do you have any other assets? (If "yes," provide a description of each asset and its estimated				
,9	market value.) Yes No				
20	· · · · · · · · · · · · · · · · · · ·				
21					
22	Rent: \$ Utilities:				
23	Food: \$ Clothing:				
24	Charge Accounts:				
25	Name of Account Monthly Payment Total Owed on This Acct.				
26	NONE \$ S				
27	\$\$				
28	\$\$				
11					

	1				
1	9. Do you have any other debts? (List current obligations, indicating amounts and to				
2	whom they are payable. Do <u>not</u> include account numbers.)				
3	NONE				
4					
5	10. Does the complaint which you are seeking to file raise claims that have been presented				
6	in other lawsuits? Yes No				
7	Please list the case name(s) and number(s) of the prior lawsuit(s), and the name of the court in				
8	which they were filed.				
9					
10					
11	I consent to prison officials withdrawing from my trust account and paying to the court				
12	the initial partial filing fee and all installment payments required by the court.				
13	I declare under the penalty of perjury that the foregoing is true and correct and				
14	understand that a false statement herein may result in the dismissal of my claims.				
15	1.7				
16	3/19/08 Shuin / Ines				
17	DATE SIGNATURÉ OF APPLICANT				
18					
19					
20					
21					
22					
23					
24					
25					
26					
27					
28					

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INMATE ACCOUNT TRANSACTIONS

PFN/AJIS: ULK162 HFA: NCJ NAME: TORRES, EDWIN JOHN ACCT BAL: .0 MSG ---RECEIPT--- TRANSACTION TUNOMA RUNNING TRANS DATE HFA NUMBER CODE LITERAL BALANCE 07/27/07 SRJ 14-97836 CBKG CR NBOK .00 .00 10/05/07 NCJ NE-02680 DMED .00 .00 10/22/07 NCJ NE-03386 DMED .00 .00 NCJ NE-07529 .00 .00 01/03/08 DMED 01/29/08 NCJ NE-08764 DMED .00 .00

.00

.00

252 W:BALANCE IS ZERO

02/07/08 NCJ NE-09511 DMED

Date: 3/19/2008 Time: 08:22:12 AM

## UNITED STATES DISTRICT COURT FOR THE NORTHERN DISTRICT OF CALIFORNIA

F	LED
WORTHERN DISTRI	W. WIENING

Dear Sir or Madam:

E-filing

Your complaint has been filed as civil case number V

transactions for the last six months.

1114

A filing fee of \$350.00 is now due. If you are unable to pay the entire filing fee at this time, you must sign and complete this court's Prisoner's In Forma Pauperis Application in its entirety. If the application is granted, you will not have to prepay the fee, but it will be taken out of income to your prisoner account in installments.

Your complaint is deficient because you did not pay the filing fee and:

1. \_\_\_\_\_\_you did not file an In Forma Pauperis Application.

2. \_\_\_\_\_\_ the In Forma Pauperis Application you submitted is insufficient because:

\_\_\_\_\_\_ You did not use the correct form. You must submit this court's current Prisoner's In Forma Pauperis Application.

\_\_\_\_\_\_ Your In Forma Pauperis Application was not completed in its entirety.

\_\_\_\_\_\_ You did not sign your In Forma Pauperis Application.

\_\_\_\_\_\_ You did not submit a Certificate of Funds in Prisoner's Account completed and signed by an authorized officer at the prison.

You did not attach a copy of your prisoner trust account statement showing

Enclosed you will find this court's current Prisoner's <u>In Forma Pauperis</u> Application, which includes a Certificate of Funds in Prisoner's Account form, and a return envelope for your convenience.

Warning: YOU MUST RESPOND TO THIS NOTICE. If you do not respond within THIRTY DAYS from the filing date stamped above, your action will be DISMISSED, the file closed and the entire filing fee will become due immediately. Filing a prisoner's In Forma Pauperis Application will allow the court to determine whether installment payment of the filing fee should be allowed.

Sincerely, V RICHARD W. WIEKING, Clerk

Deputy Clerk